

# **Semi Annual Activity Report, Reference Copy**

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New, Shorter Version for FFY 07

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October 1, 2006 – March 31, 2007

April 1, 2007-September 30, 2007

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This document is for informational purposes only.  
Actual reporting will occur online through the  
*California Nutrition Network Website.*

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Changes include:

- Elimination of check boxes for nutrition education channels
- Elimination of impression counts for unpaid television, radio and print media coverage or placements.
- Elimination of reporting on radio remotes.
- Elimination of counts for materials distributed (replaced with a brief checklist from USDA that does not require tracking materials).

*This document includes sample data. This document was excerpted from ASP code and has unavoidable formatting irregularities. Your tolerance is appreciated.*

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## I. Program Information

A. Contractor  
Name:

B. Contract  
Number: **Required Field.**

C. Reporting  
Period: October 1, 2007 - March 31, 2007

D. Person  
Completing Form: **Please do not leave field blank.**

E. Phone  
Number: *(Do not include dashes. ie. 9164495400)*

F. Email  
Address: **Required Field.**

G. Date  
Completed:

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## II. Summary of Program Activities During the Six-month Reporting Period

*Network* activities include all activities within the Scope of Work, as well as those that come about as a result of program activities. This means that you would report any overlap with other organizations, events or activities if your *Network* program was promoted or involved. Examples: *Network* program or message is "tagged" on a Safeway paid print advertisement that was not funded by the *Network*, but the contractor organization assisted in getting it placed –count as paid print advertising.

\*\* When asked for impressions: If you do not know the answer, please enter "dk" (don't know).

**This series of questions asks you to report on any television advertising or television news coverage that was generated by your agency. Do not include interviews you did for state-initiated *Network* Spokesperson Tours (those are reported separately).**

### A. Television Advertising and Public Service Announcements (Social Marketing Tool: Advertising):

1. Did you pay to have ads run on a television station?



Yes, enter # of ads \_\_\_\_\_



No

2. If yes, what are the estimated consumer impressions that were generated (this should be provided by the station or a media purchasing contractor).  \*\*

#### For Public Service Announcements (PSAs):

3. How many stations did you contact to ask them to play PSAs?

4. How many times did you contact TV stations to ask them to play Public Service Announcements? (# Contacts X number of stations)

### B. Television News Coverage (Social Marketing Tool: Public Relations)

1. Did you submit any media alerts or media tip sheets to TV stations about activities your *Network* program was doing in the past six months?



Yes



No

a. If yes, how many media alerts and/or media tip sheets did you submit to TV stations? (# of mailings X number of stations = total)?

2. Did you submit any press releases to TV stations about activities your *Network* program was doing in the past six months?



Yes



No

a. If yes, how many releases did you submit to TV stations? (# of mailings X number of stations = total)?

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## II. Summary of Program Activities during the Six-month Reporting Period (Continued)

3. How many press releases or tip sheets resulted in a TV station airing a story?

or ☐ Don't know.

4. How many interviews were you granted by television stations?

5. How many interviews resulted in the TV station airing a story?

or ☐ Don't know.

**This series of questions asks you to report on any radio advertising or radio news coverage that was generated by your agency. Do not include interviews you did for state-initiated *Network Spokesperson Tours* (those are reported separately).**

### C. Radio Advertising or Public Service Announcements Coverage (Social Marketing Tool: Advertising)

#### For Paid Radio Advertising:

1. Did you pay to have ads run on a radio station?



Yes, enter number of ads \_\_\_\_\_



No

2. If yes, what are the estimated consumer impressions that were generated (this should be provided by

the station or a media purchasing contractor).  \*\*

#### For Radio Public Service Announcements (PSA's):

3. How many radio stations did you contact to ask them to play PSA's?

4. How many times did you contact radio stations to ask them to play Public Service Announcements? (# stations X # contacts)

### D. Radio News Coverage (Social Marketing Tool: Public Relations)

1. Did you submit any media alerts or media tip sheets to radio stations about activities your *Network* program was doing in the past six months?



Yes



No

- a. If yes, how many media alerts and/or media tip sheets did you submit to radio stations? (# of mailings X number of stations = total)?

2. Did you submit any press releases to radio stations about activities your *Network* program was doing in the past six months?



Yes



No

- a. If yes, how many releases did you submit to radio stations? (# of mailings X number of stations = total)?

## II. Summary of Program Activities during the Six-month Reporting Period (Continued)

[Click here for a hint on prefilling form with zeros.](#)

3. How many press releases or tip sheets resulted in a radio station airing a story?
- ☐ Don't know.
4. How many interviews were you granted by radio stations?
5. How many interviews resulted in the radio station airing a story?
- ☐ Don't know.

This series of questions asks you to report on any print advertising or print news coverage that was generated by your agency. Do not include interviews you did for state-initiated *Network Spokesperson Tours* (those are reported separately).

### E. Paid Print Advertising (Newspaper/Magazine/Community Newsletter and Outdoor Advertising)(Social Marketing Tool: Advertising)

1. Did you place any paid ads with print media?

- ☐ Yes, enter number of ads \_\_\_\_\_
- ☐ No

- a. **If yes**, how many paid print ads were placed?
- b. **If yes**, insert the total cumulative circulation:  
(Circulation of magazine for ad 1 + circulation of magazine for ad 2 = total)

2. Did you pay for any advertisements on billboards, bus stops, or other kinds of outdoor advertising?

- ☐ Yes, enter number of ads \_\_\_\_\_
- ☐ No

- a. **If yes**, how many consumer impressions did the advertising generate?  \*\*

3. Did you sponsor any unpaid print advertising such as Kiosks or Poster displays?

- ☐ Yes
- ☐ No

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## California Nutrition Network for Healthy, Active Families - FFY 07 Interim SAAR

### II. Summary of Program Activities during the Six-month Reporting Period (Continued)

#### F. Print Media News Coverage (Newspaper/Magazine/Community Newsletter) (Social Marketing Tool: Public Relations)

1. Did you submit any media alerts or media tip sheets to newspapers or magazines about activities your *Network* program was doing in the past six months?

☐ Yes

☐ No

- a. If yes, how many media alerts and/or media tip sheets did you submit to newspapers or magazines? (# of mailings X number of newspapers/magazines = total)?

2. Did you submit any press releases to newspapers or magazines about activities your *Network* program was doing in the past six months?

☐ Yes

☐ No

If yes, how many releases did you submit to newspapers or magazines? (# of mailings X number of newspapers/magazines = total)?

3. How many press releases or tip sheets resulted in a newspaper, newsletter or magazine running a story?

or ☐ Don't know.

4. How many interviews were you granted by newspapers, newsletters or magazines?

5. How many interviews resulted in the newspapers, newsletters or magazines running a story?

or ☐ Don't know.

6. How many feature articles did you write about *Network* activities, projects or policies over the past 6 months?

- a. Total of feature articles submitted:

- b. Total number of feature articles run:

#### G. Print Media Advocacy Efforts (Social Marketing Tool: Media Advocacy)

1. How many editorial articles or letters to the editor did you or someone from your organization submit to an editor in the past six months?

- a. Total number of editorial articles or letters submitted:

- b. Total number of editorial articles or letters run:

2. How many editorial board meetings at a newspaper or magazine did you attend in the last six months?

Total number of editorial board meetings:

## II. Summary of Program Activities during the Six-month Reporting Period (Continued)

### H. Retail Outlet Promotions (Grocery Stores and Farmers Markets) (Social Marketing Tool: Sales Promotions)

Sales promotions provide paid and voluntary support of special events, materials, and incentives. The intent is to gain maximum media and consumer attention so as to stimulate interest, acceptance, trial or repeat "product purchase".

#### 1. Did you conduct any nutrition education activities in grocery stores?

☐

Yes

☐

No

#### 2. **If yes**, Did you coordinate with your Regional Nutrition Network Lead agency (RNN) to conduct retail grocery store activities?

Yes

No

3. Please complete the following table based only on activities completed by your agency that were not conducted as part of an RNN-Coordinated Effort. Do not include merchandising activities (any activity that has a lasting presence at a retail outlet such as signage, brochures, or recipe cards that are left at the retailer). You can get the totals from your activity tracking form.

#### Grocery Stores

	Activity Type	# of Events Conducted at Grocery Stores	# of Participants (Consumer Impressions) for Activity Type
a.	Taste Test	<input type="text" value="0"/>	<input type="text" value="0"/>
b.	Tour of Retail Outlet	<input type="text" value="0"/>	<input type="text" value="0"/>
c.	Other promotions (i.e excluding merchandising activities)	<input type="text" value="0"/>	<input type="text" value="0"/>

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## II. Summary of Program Activities during the Six-month Reporting Period (Continued)

This page requires a value for each field. If you answer "no" to any of the preceding questions, the form will automatically fill in the space with 0s. If you conduct only one event, please fill in the rest of the form with 0s.

[Click here for a hint on prefilling form with zeros.](#)

### 4. Did you conduct nutrition education at any farmers' market?

☒ Yes

☐ No

### 5. If yes, please complete the following table. You can get the totals from your activity tracking form.

	Activity Type	# of Events Conducted at Farmer's Market	# of Participants (Consumer Impressions) for Activity Type
a.	Taste Test	0	0
b.	Tour of Farmer's Market	0	0
c.	All other promotions	0	0

### I. Classes (Personal Sales)

Classes are defined as a single class and/or lesson in a series of separate lessons. Participation is the sum of individuals attending a single class or one lesson in a series. Using these definitions give a consistent measure of nutrition education class and attendance across all classes conducted.

### 1. Did you conduct any group or one-on-one nutrition education classes?

☒ Yes

☐ No

### 2. Please complete the following table. You can get the totals from your activity tracking form.

	Classes	# of Classes Conducted	# of Participants for All Classes
a.	Consumer Nutrition Education Classes	291	7376
b.	Provider/Staff Training Classes (i.e., nutrition education training for teachers, healthy food preparation and safety for staff, SPARK)	17	259
c.	Physical Activity Promotion Class with Nutrition Education	3	180



## II. Summary of Program Activities during the Six-month Reporting Period (Continued)

This page requires a value for each field. If you answer "no" to any of the preceding questions, the form will automatically fill in the space with 0s. If you conduct only one event, please fill in the rest of the form with 0s.

[Click here for a hint on prefilling form with zeros.](#)

### J. Promotional Events (Social Marketing Tool: Sales Promotions)

Events include those which are put on by your *Network* program, or attendance at venues put on by another agency that promote your *Network* program and activities. Example: If a *Network* program is promoted at a health fair, but the health fair is funded by another organization, then count it as a health fair event and enter booth attendance. If a *Network* program sponsors an entire event, count the entire attendance.

#### 1. Did you conduct *Network* education at any events?

☒ Yes

☐ No

#### 2. If yes, please complete the following table. You can get the totals from your activity tracking form.

	Promotional Events	# of Events Conducted	# Attended Event/Booth
a.	Organized Sports Events (i.e., community basketball game, 5k fun run/walk, softball tournament)	0	0
b.	Health Fairs/Festivals (i.e., cultural health fair, school health fair, healthy harvest festival)	0	0
c.	Community Forum or Public Meeting (i.e., hunger and nutrition forums)	0	0
d.	Open Houses, Back to School Nights	9	100
e.	Speeches and Conferences	1	50
f.	All Other Promotional Events		

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### III. Materials Distribution (Personal Sales)

Check the box(es) if your program distributed the following types of materials (include ANY materials from any program or source, new or existing, do NOT report the number of materials):

- ☐ Fact sheets/ pamphlets/newsletters
- ☐ Posters
- ☐ Calendars
- ☐ NERI (Nutrition Education Reinforcement Items) or Promotional Materials w/nutrition messages (pens, pencils, cups, wallet reference cards, etc.)
- ☐ Website
- ☐ Electronic (Email) materials (e.g. information distribution through a listserv)
- ☐ Videos/CD Rom/DVD
- ☐ Other

2. Please list the title of any materials developed by your program for the *Network* in the past 6 months, such as brochures, curricula, fact sheet, NERI (promotional items), newspaper article, newsletter, poster, script, video, website or other reproducible printed materials (do not list flyers for program activities).

1. (Title Here) \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_

**IV. Partnership Development (Social Marketing Tool: Partnership)**

- . List up to 5 organizations or programs you work with most often and the city where they are located:

Ex: San Francisco Department of Public Health (San Francisco)
1.
2.
3.
4.
5.

## V. Environmental Change (Social Marketing Tool: Policy Change)

This includes environmental changes within your organization, as well as efforts to facilitate these changes among your partner organizations

**A. As a result of your *Network* efforts for nutrition education, have you observed changes to the physical environment for physical activity, food security and healthy foods?**



Yes



No

• **If yes, check all that apply:**



Increased distribution and access to fruits and vegetables in local stores, neighborhoods, workplaces, parks and/or communities.



Developed, maintained partnerships between parents, community, schools, organizations to work towards environmental change.



Ability to conduct nutrition education using school or community gardens.



Encouraged local restaurants and grocery stores to carry culturally appropriate foods and healthier choices.



Improved food choices served at agency functions (e.g., more fruits and vegetables).



Improved food choices in agency cafeteria.



Increased daily nutrition announcements, tips, posters, or webpages.

Increased opportunities to utilize EBT (Electronic Benefit Transfer) cards for the purposes of increasing access to fruits and vegetables.

Increased access to fruits, vegetables and physical activity through participating in a school wellness committee.

Increased nutrition information available at qualifying stores, restaurants, and worksites.

Increased healthy options in vending machines in qualifying neighborhoods, parks, community centers and/or worksites.

Increased the extent of healthy nutrition cues in community, school, and neighborhood settings (outdoor signage, displays, and advertising).



Supported efforts to limit access to soda and other foods of minimal nutritional value.



Supported efforts to improve transportation to and from markets.

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## VI. Policy Change (Social Marketing Tool: Policy Change)

Policies include laws, regulations and rules (both formal and informal). Examples: school board food policies banning the sale of soda and junk food on school campuses; organizational rules that provide time off during work hours for physical activity.

Example 1: Mayor Holden declared March 2001 as African American Nutrition Month in response to active involvement from Pasadena Church of God.

Example 2: Marin County Health Department assisted Lagunitas School District in developing a food policy that was adopted by the school board on July 24, 2001.

**A. Because of your *Network* efforts for nutrition education, have you observed any policy changes that pertain to healthy eating, physical activity, or food security?**



Yes



No

• **If yes, check all that apply:**



Support for city ordinances related to nutrition or physical activity.



Support for regulations or rules that decreased or eliminated soda and food of minimal nutritional value at child care centers and school campuses.



Rules ratified about serving healthier foods at meetings, events, or in the work place.



Rules ratified to promote physical activity opportunities, such as walking breaks.



Offered educational or informational support for laws, regulations or rules limiting or banning events with sponsorship by soda companies or other competitive food companies.



Collaborated with groups or coalitions that were supporting a policy agenda that promotes *Network* goals.

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